## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/890006

|  | A COLUMN              | CLAIMS AC                                 | Column           | 4)                                      | =./Colu                      | mn 21            |          | ALL EI            |                        | ΛP     | OTHER<br>SMALL I    |                        |       |
|--|-----------------------|---|------------------|---|------------------------------|------------------|----------|-------------------|------------------------|--------|---------------------|------------------------|-------|
|  | TAL CLAIMS            |   |                  | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                              |                  |          | RATE              | FEE                    |        | RATE                | FEE                    |       |
| POR.   |                       |   | NUMBER F         | ILED                                    | NUMB                         | ER EXTRA         | .        | SIC FEE           |                        | OR     | BASIC FEE           |                        |       |
| TOTAL CHARGEABLE CLAIMS  |                       |   | ## minus 20=     |   | • 👂 /                        |                  | <b> </b> | <b>(\$</b> 9=     | •                      | OR     | X\$18=              |                        |       |
| INDEPENDENT CLAIMS minus 3 = 3   |                       |   |                  |   |                              |                  | <b> </b> | K40=              | -                      | OR     | - X80=              |                        |       |
| MULTIPLE DEPENDENT CLAIM PRESENT   |                       |   |                  |   |                              |                  |          | 135=              |                        | OR     | +270=               |                        |       |
|  | lhe difference        | <u> </u>                                  | OTAL             |   | OR                           | TOTAL            |          |                   |                        |        |                     |                        |       |
| CLAIMS AS AMENDED - PART II  |                       |   |                  |   |                              |                  |          |                   |                        | 10     | OTHER               | THAN                   | 1     |
| (Column 1) (Column 2) (Column 3)   |                       |   |                  |   |                              |                  |          | MALL I            | ENTITY                 | OR     | SMALL E             |                        |       |
| ENTA   |                       | CLAIMS<br>RÉMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVIO<br>PAID           | BER<br>DUSLY                 | PRESENT<br>EXTRA | F        | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE | <br>  |
| NO.  | Total 😘 🔯             | -23                                       | Minus            | 2                                       | 1 -                          | = "              | >        | (\$ 9≖            | 1800                   | OR.    | X\$18=              |                        | 5     |
| WE!  | Independent           | • (3.5                                    | Minus            |   | <u>b</u>                     |                  | 7        | 462               |                        | OR     | X80=                |                        |       |
|  | FIRST PRESE           | NTATION OF MI                             | JLTIPLE DEP      | ENDEN                                   | CLAIM                        |                  |          | 135=              |                        | OR     | +270=               |                        | AVAII |
|  | 1                     |   | ·.<br>:•         |   | -                            |                  |          | TOTAL             |                        | OR     | TOTAL<br>ADDIT, FEE | -                      |       |
|  |                       | (Column 1)                                | A                | (Colu                                   | mn 21 .                      | (Column 3)       | AUL      | DIT. FEE          |                        |        | ADDIT. PEET         |                        | ABL   |
| AMENDMENT B  |                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGH<br>NUM<br>PREVI                    | IEST<br>IBER                 | PRESENT<br>EXTRA | F        | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE | 5     |
|  | Total                 |   | Minus            | **                                      | -                            | <b>=</b>         |          | <b>(\$ 9=</b>     |                        | OR     | X\$18=              |                        | Z     |
| ME   | Independent           | •   | Minus            | ***                                     |                              | 8                |          | K40=              |                        | OR     | X80=                |                        |       |
| 4  | FIRST PRESE           | NTATION OF MI                             | JLTIPLE DEP      | ENDENT                                  | CLAIM                        |                  | -        |                   |                        |        |                     |                        | 1     |
|  |                       |   |                  |   |                              |                  |          | 135=              |                        | OR     | +270=               |                        |       |
|  |                       |   |                  |   | •                            |                  | ADI      | TOTAL<br>DIT. FEE |                        | OR     | TOTAL<br>ADDIT. FEE |                        | 1     |
|  |                       | (Column 1)                                | •                |   | mn 2)                        | (Column 3)       |          |                   |                        |        |                     |                        |       |
| AMENDMENT C  |                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI                            | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | F        | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |       |
| Ž OM   | Total                 | •   | Minus            | ••                                      |                              | =                |          | <b>(\$ 9=</b>     |                        | OR     | X\$18≠              |                        |       |
| ME   | Independent           | •   | Minus            | •••                                     |                              | =                |          | X40=              |                        | 1      | X80=                |                        | 1     |
| L  | FIRST PRESE           | NTATION OF M                              | ULTIPLE DEI      | PENDEN                                  | TCLAIM                       |                  | )  -     |                   |                        | OR     |                     | 1                      | 1     |
|  | If the enter in eater | ma 1 le laco than t                       | ha antor in colo | ımn 2 wei                               | a 70° in ~                   | nlumn 3          | Ľ        | 135=              |                        | OR     | +270=               | <u> </u>               | 4     |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                       |   |                  |   |                              |                  |          |                   |                        | OR     | TOTAL<br>ADDIT. FEE |                        | 4     |
|  | The "Highest Nun      | imper Previously Pa<br>nber Previously Pa | ad For (Total o  | r Independ                              | dent) is the                 | e highest numb   | er lound | in the ap         | propriate bo           | x in c | olumn 1.            |                        |       |